EV979977979

PTO/SB/05 (11-00)

Please type a plus sign (+) inside this box —

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. M122-2400

First Inventor Matthew W. Miller

Title Methods of Forming Capacitors

	Title [Methods of Forming Capacitors
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EV 979977979 US
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
See MPEP chapter 600 concerning utility patent application contents. See Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages 32] (preferred arrangement set forth below) Descriptive title of the invention Plus title page Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure Formal Total Sheets Total Pages 2 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Application Data Sheet. See 37 CFR 1.76	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. (Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. V. Other. Check for \$2.262.00; Power.of
18. If a CONTINUING APPLICATION, check appropriate box, and sup or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP)	ply the requisite information below and in a preliminary amendment
Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the Box 5b, is considered a part of the disclosure of the accompanying contine The incorporation can only be relied upon when a portion has been inadvent.	. Group Art Unit: the prior application, from which an oath or declaration is supplied under nuation or divisional application and is hereby incorporated by reference ertently omitted from the submitted application parts.
19. CORRESPOND	ENCE ADDRESS
X Customer Number or Bar Code Label: 021567	or Correspondence address below
Name Mark S. Matkin	
Wells St. John P.S.	
Address 601 West First Avenue, Suite 13	00
City Spokane	State WA Zip Code 99201-3828
•	Tephone 509-624-4276 Fax 509-838-342
Name (Print/Type) Mark S. Matkin	Registration No. (Attorney/Agent) 32,268
Signature Signature	Date 10/23/3

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (12/99)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

C mpl t if Kn wn Unknown

Petitions related to provisional applications

Submission of Information Disclosure Stmt

Recording each patent assignment per

Filing a submission after final rejection (37 CFR § 1.129(a))

For each additional invention to be examined (37 CFR § 1.129(b))

property (times number of properties)

0.00

0.00

40.00

0.00

0.00

0.00

0.00

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

TOT FY 2003		Filing Date			Filed Herewith						
Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity stater otherwise large entity fees must be paid. See Forms PTO/SB/05			First Named Inventor		entor	Matthew W. Miller					
			Examiner Name				Unknown				
See 37 C.F.R. §§ 1.27 and 1.28.			Group / Art Unit				Unknown				
TOTAL AMOUNT OF PAYMENT	(\$)2,262.00	1	Attorney Docket No.			No.	MI22-2400				
METHOD OF PAYMENT	(check one)		FEE CALCULATION (continued)								
			3. ADDITIONAL FEES								
1. LXI indicated fees and credit any overpayments to:		Larg	e Entity	/Sma	II Entity						
		Fee Cod					Fee Description	Fee Paid			
Account Number 23-0925		105	130	205	65	Surcha	arge - late filing fee or oath	0.00			
Deposit Account Wells St. John P.S		127	50	227	25	Surcha cover	arge - late provisional filing fee or sheet.	0.00			
Name Wells St. Joilli F.S.		139	130	139	130	Non-E	nglish specification	0.00			
Charge Any Additional Fee R Under 37 CFR §§ 1.16 and 1.		147	2,520	147	2,520	For fili	ng a request for reexamination	0.00			
2. X Payment Enclosed:		112	920*	112	920*		sting publication of SIR prior to ner action	0.00			
X Check ☐ Money Order	Other	113	1,840*	113	1,840*	Reque Exami	sting publication of SIR after ner action	0.00			
FEE CALCULATION	ON	115	110	215	55		ion for reply within first month	0.00			
1. BASIC FILING FEE		116	380	216	190		ion for reply within second month	0.00			
Large Entity Small Entity		117	870	217	435	Extens	ion for reply within third month	0.00			
Fee Fee Fee Fee Descrip	otion Fee Paid	118	1,360	218	680	Extens	sion for reply within fourth month	0.00			
Code (\$) Code (\$) 101 690 201 345 Utility filing fee		128	1,850	228	925	Extens	ion for reply within fifth month	0.00			
106 310 206 155 Design filing fe	770.00	119	300	219	150	Notice	of Appeal	0.00			
107 480 207 240 Plant filing fee		120	300	220	150	Filing	a brief in support of an appeal	0.00			
108 690 208 345 Reissue filing		121	260	221	130	Reque	st for oral hearing	0.00			
114 150 214 75 Provisional filir		138	1,510	138	1,510	Petitio	n to institute a public use proceeding	0.00			
		140	110	240	55	Petitio	n to revive - unavoidable	0.00			
SUBTOTAL (1)	(\$) 770.00	141	1,210	241	605	Petitio	n to revive - unintentional	0.00			
2. EXTRA CLAIM FEES		142	1,210	242	605	Utility i	issue fee (or reissue)	0.00			
Ext <u>ra Claim</u> s	Fee from Fee Paid	143	430	243	215	Design	issue fee	0.00			
Total Claims 96 -20** = 76 X		144	580	244	290	Plant i	ssue fee	0.00			
Independent 4 - 3** = 1 x	84 = 84	122	130	122	130	Petitio	ns to the Commissioner	0.00			
Multiple Dependent	=0	123	50	123	50	Potitio	ns related to provisional applications	U.00			

	SUBTOTAL (2)	(\$) 1,452.00	*Reduced by Basic Filing	g Fee Paid	SUBTOTAL	(3) (\$) 40.00
SUBMITTED BY	,				Complete (if a	applicable)
Name (Print/Type)	Mark S. Matk	kin	Registration No. (Allomey/Agent)	32,268	Telephone	509-624-4276
Signature	Men	MS	M		Date	10/22/02

126

146 690 246 345

or number previously paid, if greater, For Reissues, see below

WARNING:

Fee Description

Independent claims in excess of 3

Multiple dependent claim, if not paid

** Reissue independent claims

** Reissue claims in excess of 20

and over original patent

Claims in excess of 20

over original patent

Large Entity Small Entity

Code (\$)

204 130

Code (\$)

104 260

103 18 203 9

102 78 202 39

109 78 209 39

110 18 210 50 123 50

240

690 249

Other fee (specify)

Other fee (specify)

126 240

581 40

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.